

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

FILED

CALIFORNIA
FORM

460

JAN 23 2013

Page 1 of 13

CITY OF SANTA MARIA

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 10/21/2012
through 12/31/2012

Date of election if applicable:
(Month, Day, Year)
11/06/2012

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

<input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee	<input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="radio"/> State Candidate Election Committee	<input type="radio"/> Controlled
<input type="radio"/> Recall	<input type="radio"/> Sponsored
(Also Complete Part 5)	
<input type="checkbox"/> General Purpose Committee	<input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<input type="radio"/> Sponsored	(Also Complete Part 7)
<input type="radio"/> Small Contributor Committee	
<input type="radio"/> Political Party/Central Committee	

2. Type of Statement:

<input type="checkbox"/> Preelection Statement	<input type="checkbox"/> Quarterly Statement
<input checked="" type="checkbox"/> Semi-annual Statement	<input type="checkbox"/> Special Odd-Year Report
<input type="checkbox"/> Termination Statement	<input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495
(Also file a Form 410 Termination)	
<input type="checkbox"/> Amendment (Explain below)	

3. Committee Information

I.D. NUMBER

1342307

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Mike Cordero for Mayor 2012

STREET ADDRESS (NO P.O. BOX)

[REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED] AREA CODE/PHONE

Santa Maria, CA 93454

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

[REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED] AREA CODE/PHONE

Santa Maria, CA 93456

OPTIONAL FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Trent Benedetti

MAILING ADDRESS

2151 S. College Dr. Ste. 101

CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED] AREA CODE/PHONE

Santa Maria, CA 93455

805-922-4881

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED] AREA CODE/PHONE

OPTIONAL FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-25-13

Date

By [REDACTED]

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on 1-22-13

Date

By [REDACTED]

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on 1-22-13

Date

By [REDACTED]

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on 1-22-13

Date

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

California
Form 460

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Mike Cordero

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Mayor

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Santa Maria, CA 93454

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
 YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
 YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Schedule A
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

460

Statement covers period

from 10/21/2012

through 12/31/2012

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

I.D. NUMBER

1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2012	General Dentistry 1430 E. Main St., Ste. 203 Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00 G 12	100.00
10/24/2012	The Arnoldi Family Trust 5033 Anita Lane Santa Barbara, CA 93111	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00 G 12	100.00
10/29/2012	GROW ELECT 1020 12TH ST STE 232 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	3,500.00 G 12	3,500.00
11/05/2012	HENDRICK PEREZ GONZALEZ [REDACTED] Santa Maria, CA 93458	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DENTIST SANTA BARBARA FAMILY DENTISTRY	1,000.00	1,000.00 G 12	1,000.00
11/05/2012	SANTA YNEZ BAND OF MISSION INDIANS P.O. BOX 517 Santa Ynez, CA 93460	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		900.00	900.00 G 12	900.00
SUBTOTAL \$				4,100.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
 (Include all Schedule A subtotals.) \$ 4,100.00
2. Amount received this period – unitemized monetary contributions of less than \$100 \$ 180.00
3. Total monetary contributions received this period.
 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$ 4,280.00**

*Contributor Codes

IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Schedule B – Part 1
Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 10/21/2012

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SEE INSTRUCTIONS ON REVERSE

through 12/31/2012 Page 5 of 13

NAME OF FILER

Mike Cordero for Mayor 2012

I.D. NUMBER

1342307

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Mike Cordero	Retired			<input type="checkbox"/> PAID \$ 0.00	\$ 10,000.00		\$ 10,000.00	CALENDAR YEAR
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN \$ 0.00				PER ELECTION**
		\$ 10,000.00	\$ 0.00	\$ 0.00		\$ 0.00	10/06/2011	C12 \$ 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC							DATE INCURRED	
Mike Cordero	Retired			<input type="checkbox"/> PAID \$ 0.00	\$ 5,000.00		\$ 5,000.00	CALENDAR YEAR
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN \$ 0.00				PER ELECTION**
		\$ 5,000.00	\$ 0.00	\$ 0.00		\$ 0.00	01/24/2012	C12 \$ 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC							DATE INCURRED	
Mike Cordero	Retired			<input type="checkbox"/> PAID \$ 0.00	\$ 7,000.00		\$ 7,000.00	CALENDAR YEAR
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN \$ 0.00				PER ELECTION**
		\$ 7,000.00	\$ 0.00	\$ 0.00		\$ 0.00	05/15/2012	C12 \$ 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC							DATE INCURRED	
SUBTOTALS		\$ 0.00	\$ 0.00	\$ 22,000.00	\$ 0.00			

Schedule B Summary

1. Loans received this period \$ 1,500.00
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (Subtract Line 2 from Line 1.) **NET \$ 1,500.00**
Enter the net here and on the Summary Page, Column A, Line 2.

(Enter (e) on
Schedule E, Line 3)

Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A

** If required.

Schedule B – Part 1
Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period

from 10/21/2012

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through 12/31/2012

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

I.D. NUMBER

1342307

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 2,000.00		\$ 2,000.00	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		2,000.00	0.00	\$ 0.00		0.00		G12 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			DATE INCURRED
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 2,500.00		\$ 2,500.00	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		2,500.00	0.00	\$ 0.00		0.00		G12 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			DATE INCURRED
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 6,500.00		\$ 6,500.00	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		6,500.00	0.00	\$ 0.00		0.00		G12 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			DATE INCURRED
SUBTOTALS		\$ 0.00	\$ 0.00	\$ 11,000.00	\$ 0.00			

(Enter (e) on
Schedule E, Line 3)

Schedule B Summary

1. Loans received this period **\$ 1,500.00**
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period **\$ 0.00**
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (Subtract Line 2 from Line 1.) **NET \$ 1,500.00**
Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by another party also must be reported on Schedule A.

** If required.

Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule B – Part 1
Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 10/21/2012

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SEE INSTRUCTIONS ON REVERSE

through 12/31/2012 Page 7 of 13

NAME OF FILER

Mike Cordero for Mayor 2012

ID. NUMBER

1342307

FULL NAME, STREET ADDRESS AND ZIP CODE (IF COMMITTEE, ALSO ENTER ID NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 1,400.00		\$ 1,400.00	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		\$ 1,400.00	\$ 0.00	\$ 0.00	\$ 0.00			
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE		09/26/2012	GL2 \$ 83,900.00
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 48,000.00		\$ 50,398.03	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		\$ 48,000.00	\$ 0.00	\$ 0.00	\$ 0.00			GL2 \$ 83,900.00
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE		10/15/2012	DATE INCURRED
Mike Cordero	Retired			<input type="checkbox"/> PAID				CALENDAR YEAR
				\$ 0.00	\$ 1,500.00		\$ 1,500.00	\$ 73,900.00
Santa Maria, CA 93454	Santa Maria Police Department			<input type="checkbox"/> FORGIVEN				PER ELECTION**
		\$ 0.00	\$ 1,500.00	\$ 0.00	\$ 0.00			
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE		11/09/2012	GL2 \$ 83,900.00
								DATE INCURRED
SUBTOTALS		\$ 1,500.00	\$ 0.00	\$ 50,900.00	\$ 0.00			

Schedule B Summary

1. Loans received this period \$ 1,500.00
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (Subtract Line 2 from Line 1.) **NET \$ 1,500.00**
Enter the net here and on the Summary Page, Column A, Line 2.

(Enter (e) on
Schedule E, Line 3)

tContributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A

** If required.

**Schedule C
Nonmonetary Contributions Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

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Statement covers period

from 10/21/2013

through 12/31/2012

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

ID NUMBER

1342307

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2012	Express Printing Services 121 N. Blosser Rd. Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Signs donated	288.80	288.80 G 12	288.80
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 288.80

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
 (Include all Schedule C subtotals.) \$ 288.80

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0.00

3. Total nonmonetary contributions received this period.
 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$ 288.80**

***Contributor Codes**

IND – Individual

**COM – Recipient Committee
(other than PTY or S)**

OTH – Other (e.g., business entity)

PTY – Political Party

SCC – Small Contributor Committee

Schedule E Payments Made

SCHEDULE E

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period

from 10/21/2012

through 12/31/2012

DALE R. KIRK
ELECTIONS DIVISION

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

I.D. NUMBER

1342307

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FREEMAN PUBLIC AFFAIRS, INC.	LIT			7,150.00
1405 MARCELINA STE. 111 Torrance, CA 90501				
FREEMAN PUBLIC AFFAIRS, INC.	LIT			30,650.00
1405 MARCELINA STE. 111 Torrance, CA 90501				
Mayday Marketing	CNS			2,483.60
P.O. Box 779 Grover Beach, CA 93483				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 40,283.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>60,653.03</u>
2. Unitemized payments made this period of under \$100	\$ <u>0.00</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0.00</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>60,653.03</u>

**Schedule E
(Continuation Sheet)
Payments Made**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period

from 10/21/2012

through 12/31/2012

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FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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I.D. NUMBER

1342307

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stimulus Marketing, Inc.				
744 Manda Drive Santa Maria, CA 93455		RAD		3,869.00
VTC Enterprises				
2445 A Street Santa Maria, CA 93456		PRT		3,647.83
American General Media				
2325 Skyway Dr. Ste H Santa Maria, CA 93455		RAD		2,006.00
Benedetti & Associates, CPA, Inc.				
2151 S. College Dr. Ste. 101 Santa Maria, CA 93455		PRO		252.70
FREEMAN PUBLIC AFFAIRS, INC.				
1405 MARCELINA STE. 111 Torrance, CA 90501		CNS		10,000.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 19,775.53

Schedule F
Accrued Expenses (Unpaid Bills)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

Statement covers period

from 10/21/2012through 12/31/2012FILER ID
Mike Cordero

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

ID NUMBER

1342307

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
FREEMAN PUBLIC AFFAIRS, INC. 1405 MARCELINA STE. 111 Torrance, CA 90501	LIT	30,650.00	0.00	30,650.00	0.00
FREEMAN PUBLIC AFFAIRS, INC. 1405 MARCELINA STE. 111 Torrance, CA 90501	LIT	7,150.00	0.00	7,150.00	0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS \$ 37,800.00 \$ 0.00 \$ 37,800.00 \$ 0.00

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$ 0.00**
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$ 37,800.00**
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$ -37,800.00**
May be a negative number

Schedule I
Miscellaneous Increases to Cash

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE I

CALIFORNIA
 ELECTIONS
460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Cordero for Mayor 2012

Statement covers period
 from 10/21/2012

through 12/31/2012

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I.D. NUMBER

1342307

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
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Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0.00

Schedule I Summary

1. Itemized increases to cash this period. \$ 0.00
2. Unitemized increases to cash of under \$100 this period. \$ 2.98
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 2.98